CERTIFICATE OF MAILING BY FIRST CLASS MAIL" (37 CFR 1.8) Docket No. Andrew Bartlett, et al. MCA-460 PC/US Applicant(s): Examiner Group Art Unit Filing Date Application No. September 20, 2001 1723 09/937,114 Krishnan S. Menon Sealing Device for Filtration Devices TRADE I hereby certify that the below items are being deposited with the United States Postal Service first class mail in an envelope addressed to: The Commissioner of Patents and Trademarks, P.O. Box 1450, Alexandria, VA 22314-1450 on

Amendment Transmittal (1 pg)

Amendment (9 pgs)

Petition for Extension of Time (1 pg.)

Authorization to Charge Fees to Deposit Account No.: 133577

Certificate of Mailing (1 pg.)

Stacey Gross

Millipore Corporation

Lacy GUN



Attorney Docket No. MCA-460 PC/US Amendment Dated: March 15, 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

A. Bartlett, et al.

Application Number:

09/937,114

Group Art Unit: 1723

Filed:

September 20, 2001

Examiner: Menon, Krishnan S.

Title:

Sealing Device for Filtration Devices

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22314-1450

AMENDMENT TRANSMITTAL

_		
c	ĩ	

Transmitted herewith is an amendment in the above-identified application.

No additional fees under 37 C.F.R. Rule 1.16 are required.

The fee has been calculated as shown below. X

	(Col. 1) Claims Remaining After Amendment		(Col. 2) Highest Number Previously Paid For		(Col. 3) Present Extra	Rate	Add'l Fee
Total	* 6	-	** 27	=	0	X50	0
Indep.	* 2	-	*** 3	=	0	X200	0
TOTAL ADDITIONAL CLAIM FEE:						0	
Extension of Time under 37 CFR 1.136(a)						1020.00	
Submission of Information Disclosure Statement					0		
TOTAL FEE:						1020.00	

	A check in the amount of \$ is attached.
\boxtimes	Charge \$ _1020.00 to Deposit Account No. 13-3577. A duplicate copy of this sheet is attached.
\boxtimes	Please charge any additional fees or credit overpayment to Deposit Account No. 13-3577.
Date:	March 15, 2007 John Dana Hubbard Reg. No. 30,465 MILLIPORE CORPORATION

290 Concord Road, Billerica, MA 01821

Phone: (978) 715-1265

JDH/smg

If the entry in Col. 1 is less than entry on Col. 2, write "0" in Col. 3
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".